UNIVERSITY OF
GEORGIA
1785

**Franklin College of
Arts and Sciences**

Department of Anthropology

Laboratory of Archaeology

Collections Access and Use

Researcher: _____

Collection (s): _____

_____

Date Collection Accessed: _____

COLLECTIONS ACCESS AND USE AGREEMENT

Collections at the Laboratory of Archaeology are available for research to *qualified researchers for scientific and educational research within normal business hours. Researchers must agree to abide by the Laboratory of Archaeology's standards of collection management and use. Visiting researchers will be provided with space for analysis, photography equipment, microscopes, associated maps and documents, in addition to more specific tools such as scales, calipers, etc. Use of copy machine and associated supplies will be charged to the researcher. Per Georgia law, the Laboratory prevents access to site location and information for the general public therefore; the Laboratory limits access to the collections to Laboratory staff, authorized visitors, and qualified researchers. The collections requested will be made available at the Laboratory of Archaeology for the authorized researcher based on the conditions below:

1. Researcher will fill out, sign, and gain approval for research and access by following the Laboratory's Research and Access Guidelines.
2. Researcher will maintain all care in handling, unpacking and repacking of collections.
3. One box and one mother bag out at a time.
4. All collections that are accessed must be repacked in the same manner and within the same boxes unless otherwise directed by the Laboratory Director/Operations Director.
5. There will be no unapproved modifications made to the collection without written approval from the Laboratory Director/Operations Director.
6. If preservation or conservation of collections is in poor condition, it must be reported to the Laboratory Director/Operations Director.
7. The Laboratory of Archaeology, University of Georgia should be cited in any resulting publication, report, presentation, etc., and a copy of which should be sent to the Laboratory. Please cite the materials as: Collection or Site Number and Site Name, Laboratory of Archaeology, University of Georgia.
8. The Laboratory of Archaeology must receive a copy of data and imagery generated from the research of the collection.
9. Special Conditions/Exceptions as discussed with the Laboratory Director/Operations Director.
10. The Laboratory also requires copies of data, reports, publications, presentations, imagery, etc. produced as a result of this research to be sent to the descendant communities that were consulted on and the controlling agency of the collection.

*Qualified researchers consist of professional archaeologists with at least a Master's Degree in Anthropology or Archaeology, an official representative of a Federally recognized tribe or nation, be a current Registered Archaeologist with the Register of Professional Archaeologists, or students working in the field of archaeology under the supervision of a professional archaeologist. Due to Georgia law, site location and information is protected (OCGA 50-18-72[a][10]). Therefore, if you are not a professional archaeologist then we cannot accommodate your request.

Authorized Researcher:_____ Phone:_____

Agency, Institution, CRM Firm:_____ Email: _____

Address:_____

Project/Collection (s) Name:_____

_____

Project/Collection Site Number (s):_____

Equipment Needed:_____

Request Access Period From:_____ To:_____

Additional Information:

_____

_____

Please provide a brief overview of the objectives of research:

_____

_____

_____

_____

_____

_____

Please identify what data, reports, publications, presentations, imagery, exhibits, etc. will be generated from this research and when (if applicable) it will be submitted to the Laboratory:

_____

_____

_____

_____

Will this research resulted in any changes to the collection? If so, please note below:

_____

_____

_____

_____

I have read the above collections access and use regulations and agree to adhere to these policies.

_____   _____
Signature of Researcher   Date

_____   _____
Signature of Laboratory Director/Operations Director   Date